EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? FINANCIAL DISCLOSURE STATEMENT exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics EXEMPTION - Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for TRUSTS - Details regerding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child? reporting period C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the A. Did you, your spouse, or your dependent child: Name: **UNITED STATES HOUSE OF REPRESENTATIVES** FILER a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or Receive more than \$200 in unearned income from any reportable. asset during the reporting period? Ben amin X U.S. House of Representatives Employing Office: New Officer or Employee Candidates - Date of Election: New Member of or Candidate for Thomas THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" Flow State: District Shared Staff Filer Type (If Applicable): R **至** Yes A Ø Daytime Telephone: For New Members, Candidates, and New Employees 중 Principal Assistant š 중 -Z Did you receive compensation of more than \$5,000 from single source in the current year and two prior years? F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing? E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? FORM B ಕ Period Covered: January 1, Check if Amendment A \$200 penalty shall be assessed against any individual who files more than 30 days late. SEP 07 2018 י עריטו שבוווב בינלטווסטב לבוובר -(Office Use Only) 18 SEP 12 FH 1:37 ¥8 3 š 3 3 Page 1 of Z 20 Š Z Š R R 7

SCHEDULE A - ASSETS & "UNEARNED INCOME"

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| | ЕI | L | ļ. — | 十 | m | | T | if you so choose, you may indicate that an asset o froome source is that of your spouse (SP) o dependent child (CC), or joinify held with anyone (JT) in the optional column on the far left. For a detailed decussion of Schedule A requirements please refer to the instruction bootlet. | if you report a privately-traded fund that is Excepted investment Fund, please check the "E box. | Exclude: Your personal residence, including secons yomes and vacation homes (uniess there was renta homes and vacation homes (uniess there was renta noome during the reporting period); and sery financia manest la, or income derived from, a federa etievnent program, including the Thrift Sevings Plea. | For an ownership interest in a privately-held busine that is not publicly traded, state the name of the business, the nature of its activities, and geographic location in Block A. | For rental and other real property hald for investment provide a complete address or description, e.g. rental property," and a city and state. | For bank and other cash accounts, total the emount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts. | For all MAs and other retrement plans (such as 401(k) plans) provide the value for each asset hald in the account that exceeds the reporting thresholds. | Provide complete names of stocks and mutual fund (do not use only licker symbols). | ncome during the year. | exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which percented from their \$200 in "usesmed" | identify (a) each asset held production of income and with | A | | SCHEDULE A – ASSETS & "UNEARNED INCOME" |
| Bank Account | In was tracest | Injectment | HX | | Examples: | | | alled der to | in de | A Policy A | £ 2 2 3 | 98 | 1.50 and | 33.5 | on on | 20 | y og Si | 3 3 | Assets and/or income Sources | | 面 |
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| 7 | 3 | 1 | A - Personal | ABC | ž | į į | F | you may indicate that an gaset or a flat of your apouse (SP) or a flat of your apouse (JT) c). or jointly had with anyone (JT) ann on the far ieft. used on of Schedute A requirements inseruction booties. | Private F | personal residence, including alson homes (unless there we re reporting period); and any income derived from, a arm, including the Thrift Sevin | Hand Area | 4 | cash acc hnank n inte | 200 | Ker s | 8 | | | 5 | 9 | |
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| | | | | | | | | \$1-\$1,000 | | | | | 9 | | 5 | only because it generated income. None. | specify are meanod used. If an asset was sold durin | A | | | عَم |
| | | | L. | | 15 | | | \$1,001-\$15,000 | · · · · · · · · · · · · · · · · · · · | | | | n | | P N | Ž. | W 17 | LE SE | | | Ž |
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| X | | | | T | | | × | \$50,001-\$100,000 | | | | | r): | | 3 8 | 3 | 9 | N M | 5 | | <u> </u> |
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| | | | | | | | | \$500,001-\$1,000,000 | | | · · · · · · · · · · · · · · · · · · · | | 3 | | 7 7 | 3 | 2 | 3 3 | Value of Asset | 8 | Ž |
| | | | | | | | | \$1,000,001-\$5,000,000 | | | | | - | | *Column M is for assets held by your spouse or depender child in which you have no interest. | 8 | ğ | Indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please | 2 | | <u>ั</u> |
| | | | | | | \Box | | \$5,000,007-\$25,000,00 |) | | | | | | ž | 1 | 0 | 200 | | | Ş |
| | | | | L | \perp | | | \$25,000,001-850,000,0 | 00 | | | | × | | 8 | value snould | 3 | Ve par | | | ñ |
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| <u>_</u> | | _ | <u> </u> | _ | 4 | 4 | | Spouse/DC Asset over | \$1,000,000° | | | | * | | | | | | | | İ |
| X | | <u> </u> | <u> </u> | | | 1 | | NONE | | | | | | | | reinvested, must be disclosed as for assets held in taxable account | 1 | Check all columns that apply. that generate tax-deferred inc. | | | |
| | | X | | | _ | | × | DIVIDENOS | | | | | | _ | None" if the asset gene during the reporting period | | Tax-Deferred | 3 × | | | |
| | X | <u></u> | | L | | | | RENT | | | | | | _ | if the asset generated no he reporting period. | 13 | | 8 8 | マ | | |
| | | | | | | | | INTEREST | | | | | | | 38 | 51 | 2 8 2 | 3 | Type of Income | œ | Z |
| | | | | | | | | CAPITAL GAINS | | | | | | | 3.8 | | 8 8 | 9 4 | 흑 | BLOCK C | Name: |
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| | | | 1 | _ | 2 | P | | | | | | | | | 5 | | Dividend | Check all columns that apply. For accounts that generate tax-deferred income (such as | | | l Kv |
| | | | | hoom | Partnerafit | | | Other Type of Income (| Specify: e.g., | Partnership Incom | e or Farm Incom | lej | | | ROOM | Check | | account (such as | | | 62 |
| 下 | | X | | T | | | | None | : | | | | - | | | δ | | | | • | amin |
| | | | | | | | × | \$1-\$200 | | | | | * | | | *Column XI | 7 | 8 8 | | | 3 |
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| L | | | <u> </u> | \downarrow | _ | | | \$1,001-\$2,500 | | | | | ₹ | | | <u>\$</u> | 1 | # B | | | L |
| | | | _ | ┸ | _} | <u> </u> | | \$2,501-\$5,000 | | | | | < | Ę | | 88 | 90 | 0 7 E | | | <u> </u> |
| | | | <u> </u> | > | 4 | 4 | | \$5,001-\$15,000 | | | | | \$ | 3 | | 3 | 3 | 9 6 | | | \$ |
| | × | | - | + | _ | - | | \$15,001-\$50,000 | | | | | 8 | Current Year | | is for assets held by your spouse or dependent child in which you have no interest | 1 | Q R | | | <u>آ</u> |
| - | | | ┼ | +- | + | \dashv | | \$50,001-\$100,000 | | | | | W.A. | 2 | | Ž | A, n | T T | | | " |
| - | \vdash | +- | ╁ | + | \dashv | \dashv | | \$100,001-\$1,000,000 | | • | | | <u> </u> | | | spo. | 00 | \$ £ | > | | 5 |
| | + | + | + | + | \dashv | \dashv | | \$1,000,001-\$5,000,000 Over \$5,000,006 | · | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | ··· | × | | | | 200 | 2 | Amount of Income | | 0 |
| - | | + | +- | +- | + | ┥ | | Spouse/DC income on | r \$1,000.000 | | | | <u>ع</u> | | | 9 | mand Sector | Ching P | Ħ | BL | |
| 文 | | \vdash | 1 | T | + | 1 | _ | None | | | | | ~ | \dashv | | and a | . \$ | ¥ or | 9 | вгоск в | ' |
| 1 | | 1 | 1 | 1 | + | 1 | | \$1-\$200 | • | | | | = | | | 2 | 3 | M C. | 20 | 0 | |
| | | T | | T | _ | | * | \$201-\$1,000 | | | | | 題 | | | 3 | 3 | Mun De | Ĕ | | l |
| | | | | | | | | \$1,001-\$2,500 | | | | | ₹ | . | | \$ | ğ | \$ C. | | | Pag |
| | | | | I | \perp | | | \$2,501-\$5,000 | | | | | ٧ | Preceding Year | | ž, | ķ | × bet | | | 1,8 |
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| | | X | | <u> </u> | 4 | _ | | \$15,001-\$50,000 | | | | | ş | ğ | | 3 | 8 | ¥ 3 | | | |
| <u> </u> | | ļ. | - | + | \dashv | 4 | | \$50,001-\$100,000 | | | | | I HA | 2 | | 1 | 5 | 100 | | | <u></u> |
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| \vdash | +- | + | + | + | \dashv | \dashv | | \$1,000,001-\$5,000,000 | | | | | × | | | | 8 | For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other easets indicate the category of income by checking the appropriate box below. Dividends, interest, and | | | |
| - | - | + | + | + | + | \dashv | | Over \$5,000,000 Spouse/DC income ov | * \$1,000,000 | • | | | <u>×</u> | | | | | # OF | | | |
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| BLOCK A Assets and/or income Sources ASSET NAME | ASSET NAME | | | | | | | | | | | | | | | |
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| \$25,000,001-\$50,000,000 | | | | | | | | | | | | | | | | |
| Owr \$50,000,000 | | | \vdash | | | | | | | | | H | | | | |
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| DIVIDENDS | | | | | | \vdash | | | \vdash | | | - | - | | | |
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| MTEREST CAPITAL GAINS EXCEPTEDBLING TRUST TAX-DEFERRED | | | - | | <u> </u> | <u> </u> | | - | | ļ | | | | ļ | | |
| EXCEPTED/BLIND TRUST 8 O | ! | | | | | <u> </u> | | ļ | ļ | ļ | | | ļ | | | |
| TAX-DEFERRED & Other Type of Income (Specify: e.g., Partnership Income or Farm Income) | | | | | | | | | | | | | | | | |
| None - | | | | <u> </u> | <u> </u> | <u> </u> | <u> </u> | | | | | | | | | |
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| \$201-\$1,000 ± | | | | | | | | | ļ | ļ | | | | | | |
| \$1,001-\$2,500 ≥ | ļ | - | - | | | \vdash | | | | | ļ | | - | ļ | | |
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| \$1,001-\$2,500 | | | | | | | | | | | | | | | | |

SCHEDULE A -- ASSETS & "UNEARNED INCOME"

SCHEDULE C - EARNED INCOME

| Benjamir Thomas Wolf | |
|----------------------|--------|
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| H-M | • |
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| EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. | List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below. |
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|--|--|

| INCOME LIMITS Members and emporessional service | INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff. | come may apply to you after yount is \$28,050. In addition, cert staff. | u are on House payroll. The 2017 ain types of income (notably honorar | Ilmit on outside earned income for ia, director's fees, and payments for |
|---|--|--|---|--|
| | | • | Am | Amount |
| | Source (include date of receipt for honoraria) | Type | Current Year to Filing | Preceding Year |
| | ABC Trade Association, Battmore, MD (July 15) | Honorarlum | \$0 | \$500 |
| Examples: | State of Maryland (Oct. 2) Chall Var Roundighie (Oct. 2) Ontack Con why Round of Education | Spouse Speech | \$0 \$0 | \$1,000 NA |
| | All Impone originated from cent or investments | | | |
| Suc | and are listed in previous page | | | |
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SCHEDULE D - LIABILITIES

| | Name: |
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| | Thomas Wolf |
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| | of / |

period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child. Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting

| exception 4 10,000. | , DOG. COMMITTAL SERVICE BASE STATE STATE OF THE SERVICE SPECE | | | | 20 | \dashv 1 | n - | n - | n - | Amount of Liab | Amount of Liability | Amount of Liability | Amount of Liability |
|--------------------------------------|--|--|--|-----------------------|--|------------|-------------------------|-----------------------|--|--|-----------------------|-----------------------|--|
| 88. इह. | Creditor | Date Liability Incurred MO/YR | Type of Liability | \$10,001- \$15,000 | \$10,001- \$15,000 > \$15,001- \$50,000 % | | \$15,001- \$50,000 % | \$15,001- \$50,000 | \$15,001- \$50,000 © \$50,001- \$100,000 © \$100,001- \$250,000 | \$15,001- \$50,000 % \$50,001- \$100,000 % \$100,001- \$250,001- \$500,000 m | \$15,001- \$50,000 | \$15,001- \$50,000 | \$15,001- \$50,000 \$50,001- \$100,000 \$100,001- \$250,000 \$250,001- \$500,000 \$1,000,001- \$5,000,000 \$5,000,001- \$25,000,000 \$25,000,001- \$25,000,000 |
| Exemple First Bank of Wilmington, DE | | 5/98 | Mortgage on Rental Property, Dover, DE | | | | × | × | × | × | × | × | × |
| wells Forso | | 5/2013 | Martages on DC Rostal | | | | * | | | | | | |
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SCHEDULE E - POSITIONS

or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

| | | ouncy / Investor | Position |
|--|-------------------------------------|---|----------------------|
| | Trecipied 0 to Zero dollars in 2018 | Park and Field LLC (Chicago Restourant) | Name of Organization |

SCHEDULE F - AGREEMENTS

| Benjamin Thomas Wolf | Benjamin Thomas Wolf Page of | | Name: |
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| Thomas Wolf | 1 | _ | Benjam'in |
| Wolf | 1 | | Thomas |
| | Page / | | Wolf |

| identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former. |
|--|
| Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former |
| employer. |

| Date | Parties to Agreement | Terms of Agreement |
|------|----------------------|--------------------|
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SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

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| Source (Name and City/State) | Brief Description of Duties |
| Example: Doe Jones & Smith, Hometown, Homestate | Accounting Services |
| Park stield 4c | I own 75 percent of a Chicago Restawant by divideds /payments |
| | were 30,000 to 2017 and \$\$ to 2018 |
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